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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Nam	e of Candidate (in full)									
Barr	, Garland Andy, , ,									
	ess (number and street) Box 2059	☐ Check if address changed			Candidate's FEC Identification Number H0KY06104					
(c) City,	State, and ZIP Code					3. Is This	New	1		Amended
Lex	ington		KY	4058	8-0588	Statem	nent (N)	OR	×	(A)
4. Party Aff	iliation	5. Office Sough	t		6. State & Dist	rict of Candid	late			
REPUE	BLICAN PARTY	House			KY	06				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7. I hereby	I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)									
NOTE: T	his designation should be	filed with the app	ropriate offic	e listed in th	ne instructions.					
(a) Nam	e of Committee (in full)									
An	dy Barr for Cong	ress Inc.								
` '	ess (number and street) Box 2059									
(c) City,	State, and ZIP Code									
Le	xington				KY	40588	-0588			
candidad	authorize the following narcy. This designation should be to see the control of	ned committee, v	vhich is NOT	my principa		•	ceive and expe	nd funds	on be	half of my
(a) Name of Committee (in full) Andy Barr Victory Committee										
	,	ommuee								
	ess (number and street) W Lee Highway	Ommillee								
	ess (number and street) W Lee Highway									
332 # 30	ess (number and street) W Lee Highway	ommitee								
332 # 30 (c) City,	ess (number and street) W Lee Highway	ommittee			VA	20186-	-2428			
332 # 30 (c) City,	ess (number and street) W Lee Highway 3 State, and ZIP Code		ment and to	the best of l				nd compli	ete.	
# 30 (c) City, Wa	ess (number and street) W Lee Highway I3 State, and ZIP Code rrenton		ment and to	the best of i				nd comple	ete.	
# 30 (c) City, Wa	ess (number and street) W Lee Highway I3 State, and ZIP Code rrenton I certify that I have exa		ment and to			Date	true, correct ar	nd compl	ete.	
332 # 30 (c) City, Wa Signature of	ess (number and street) W Lee Highway I3 State, and ZIP Code rrenton I certify that I have exa	nmined this State		[Elect	my knowledge a	Date 02/22/20	true, correct ar			
332 # 30 (c) City, Wa Signature of	ess (number and street) W Lee Highway 3 State, and ZIP Code rrenton I certify that I have exact of Candidate and Andy, , ,	nmined this State		[Elect	my knowledge a	Date 02/22/20	true, correct ar			

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	FREINDS OF ANDY BARR COMMITTEE							
	(b) Address (number and street) 332 W LEE HWY # 303							
	(c) City, State, and ZIP Code							
	WARRENTON VA		20186					
8.	8. I hereby authorize the following named committee, which is NOT my principal camp candidacy. NOTE : This designation should be filed with the principal campaign cor	-	mmittee, to receive and expend funds on behalf of my					
	(a) Name of Committee (in full) FRIENDS OF ANDY BARR COMMITTEE							
	TRIENDS OF AND FBARR COMMITTEE							
	(b) Address (number and street) 332 W LEE HWY # 303							
	(c) City, State, and ZIP Code							
	WARRENTON VA		20186					
	WithEttiett		25100					
8.	8. I hereby authorize the following named committee, which is NOT my principal campaign candidacy. NOTE : This designation should be filed with the principal campaign cor (a) Name of Committee (in full)	-	mmittee, to receive and expend funds on behalf of my					
	PROTECT THE HOUSE							
	(b) Address (number and street) PO BOX 30844							
	(c) City, State, and ZIP Code							
	BETHESDA MD		20824					
8.	8. I hereby authorize the following named committee, which is NOT my principal camp candidacy. NOTE : This designation should be filed with the principal campaign cor (a) Name of Committee (in full)		mmittee, to receive and expend funds on behalf of my					
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							